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PATENT

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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group
Art Unit: 1651

Attorney
Docket No.: HER0033

Applicant: Edmond Daniel Roussel et al.

Invention: ABSORBABLE COMPOSITION
CONTAINING PROPIONIC BACTERIA
CAPABLE OF RELEASING NITRIC
OXIDE IN THE HUMAN OR ANIMAL
ALIMENTARY CANAL

Serial No: 09/331,554

Filed: August 23, 1999

Examiner: V. Afremova

Certificate Under 37 CFR 1.8(a)

I hereby certify that this correspondence is being
deposited with the United States Postal Service as first
class mail in an envelope addressed to: Assistant
Commissioner of Patents, Washington, D.C. 20231

on

11-6-01

Anthony Niewyk

STATEMENT OF ALAIN OURY

Assistant Commissioner for Patents
Washington, D.C. 20231

I, ALAIN OURY, make the following statements:

1. I am a joint inventor of the above-referenced application;
2. My name was omitted from the non-provisional application and occurred through error and without any deceptive intent on my part.
3. I request that my name be added to the above-referenced non-provisional application.
4. I have executed the proper Declaration and the same is being submitted herewith.

October 26, 2001

Date

ALAIN OURY

ALAIN OURY

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PTO/SB/G2A (11-00)

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Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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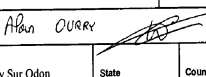


DECLARATION

ADDITIONAL INVENTOR(S)
Suppl m ntal Sh t
Page 1 of 1

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Name of Additional Joint Inventor, if any:		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Alain		Oury	
Inventor's Signature			Date October 26, 2001
Residence: City	Aunay Sur Odon	State	Country France
Mailing Address "Le Breuil"			
Mailing Address 14260 Aunay Sur Odon			
City		State	Country France
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City		State	Country
Mailing Address			
Mailing Address			
City		State	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City		State	Country
Mailing Address			
Mailing Address			
City		State	Country

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